## FORM D



#### **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL					
OMB Number: 3235-007					
Expires:	May 31, 2005				
Estimated avera	ige burden				

hours per response. . . . . 16.00

SEC US	E ONLY						
Prefix	Serial						
DATE RECEIVED							
	1 80						

UNIFORM LIMITED OFFERING EX	EMPTION
Name of Offering (X) check if this is an amendment and name has changed, and indicate change	a) // A MUC
100,000 Private Placement of 60,060 Units of LLC Interest	on 4(6) DULOECENED JUL 20
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section Type of Filing: New Filing Amendment	on 4(6) DULOECEVER DUL 20
A. BASIC IDENTIFICATION DATA	JUL 1 9 2004 / Manch
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	181 /29/
Tuckerbrook Alternative Investments, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Co	ode) Telephone Number (Including Area Code)
30 Doaks Lane, Marblehead, MA 01945	(781) 639-0900
Address of Principal Business Operations (Number and Street, City, State, Zip C (if different from Executive Offices)	Code) Telephone Number (Including Area Code)
Brief Description of Business	
To invest and reinvest in financial services	
Type of Business Organization	
corporation   limited partnership, already formed   X of   business trust   limited partnership, to be formed	ther (please specify): limited liability company
Month Year  Actual or Estimated Date of Incorporation or Organization: 08 03 X Actual   Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for  CN for Canada; FN for other foreign jurisdiction)	Estimated State:
GENERAL INSTRUCTIONS	E1167
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulati 77d(6).	on D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the off and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address gi which it is due, on the date it was mailed by United States registered or certified mail to that address	ven below or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.	C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be map photocopies of the manually signed copy or bear typed or printed signatures.	anually signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only thereto, the information requested in Part C, and any material changes from the information previously not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with are to be, or have been made. If a state requires the payment of a fee as a precondition to the clain accompany this form. This notice shall be filed in the appropriate states in accordance with state this notice and must be completed.	the Securities Administrator in each state where sales im for the exemption, a fee in the proper amount shall law. The Appendix to the notice constitutes a part of
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the feder appropriate federal notice will not result in a loss of an available state exemption	al exemption. Conversely, failure to tile/the

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

filing of a federal notice.

		A. BASIC I	IDENTIFICATION DA	TA	
2. Enter the information	requested for the fo	ollowing:		<u> </u>	
<ul> <li>Each promoter of</li> </ul>	the issuer, if the i	ssuer has been organized	d within the past five year	ars;	
		•	•		of a class of equity securities of the
		•	of corporate general and	I managing partners o	f partnership issuers; and
Each general and	managing partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	X Beneficial Owner	Executive Off	icer 🛛 Director	General and/or Managing Partner
Full Name (Last name first, Hassett, John J.	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)		<del></del>
30 Doaks Lane, Marb	lehead, MA 01	L945			
Check Box(es) that Apply:	Promoter	Beneficial Owne	r Executive Offi	cer Director	General and/or Managing Partner
Full Name (Last name first. Groom, David	if individual)	····	······································	· · · · · · · · · · · · · · · · · · ·	
Business or Residence Address 30 Doaks Lane, Marb			Code)		······································
Check Box(es) that Apply:	Promoter	Beneficial Owner	r Executive Offi	cer 🗶 Director	General and/or Managing Partner
full Name (Last name first, Smith, Turner	if individual)				
Business or Residence Addre 30 Doaks Lane, Marb		•	Code)		<del></del>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Offi	cer Director	General and/or Managing Partner
full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip (	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	cer Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)		<del></del>		
Business or Residence Addre	ss (Number and	Street, City, State, Zip (	Code)	<del></del>	
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	er Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)				
usiness or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	er Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)		<u></u>		
		Street, City, State, Zip C			

					В.	INFORMAT	TION ABO	UT OFFER	ING			V -	N-
1.	Has the	e issuer so	ld, or does	the issuer	intend to s	ell, to non-	accredited	investors i	n this offe	ring?		Yes . 🗍	No 😧
						n Appendi:						_	
2.	What is	s the minir	num invest	nent that	will be acc	epted from	any indivi	dual?				\$_Nc	<u>minimum</u>
												Yes	No
3.													
4.	commi: If a per or state	ssion or sin son to be li s, list the n	nilar remun sted is an as	eration for sociated p proker or d	solicitation erson or ag ealer. If m	n of purchas ent of a bro ore than fiv	sers in conn ker or deal ve (5) perso	ection witl er registere ns to be lis	n sales of se d with the ted are asse	curities in SEC and/o	directly, any the offering r with a state sons of such	;. e	
Full	Name (	Last name	first, if ind	ividual)									
Busi	iness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nan	ie of As	sociated B	roker or De	aler									
State	es in Wi	nich Person	n Listed Ha	s Solicited	or Intend	to Solicit	Purchasers	 i					
	(Check	"All State	s" or check	individua	l States)			••••••••••				☐ Al	1 States
	ΛΙ. IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
	<u> </u>		first, if ind		d Street, C	City, State,	Zip Code)						
Nam	e of As	sociated Bi	roker or De	aler		·	·						
State	s in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers		<del></del>				
	(Check	"All States	s" or check	individual	States)			***************************************	************			☐ All	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full	Name (1	Last name	first, if indi	vidual)									
Busi	ness or	Residence	Address (N	Jumber an	d Street, C	ity, State, 2	Zip Code)						
Nam	e of Ass	ociated Br	oker or Dea	iler			<del></del>						
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers			<del></del>			
(	(Check	"All States	" or check	individual	States)		•	••••				☐ All	States
[	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		ggregate ering Price	Aı	nount Already Sold
	Debt	\$	0	_ <b>\$</b>	0
	Equity	s	0	\$_	0
	☐ Common ☐ Preferred			_	
	Convertible Securities (including warrants)	<b>s</b>	. 0	\$	0
	Partnership Interests			\$_	0
	Other (Specify limited liability gompany interests			\$10	00,000
	Total				00,000
	Answer also in Appendix, Column 3, if filing under ULOE.			- '	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	N In	umber vestors	C	Aggregate ollar Amount of Purchases
	Accredited Investors		6	\$	100,000
	Non-accredited Investors			<b>S</b> _	0
	Total (for filings under Rule 504 only)		0	\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering		ype of curity	D	ollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total		N/A	<b>S</b>	N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs		🗆	<b>S</b>	0
	Legal Fees		X	\$ <u>2</u> ,	000
	Accounting Fees		🗆	<b>S</b>	
	Engineering Fees			<b>s</b>	
	Sales Commissions (specify finders' fees separately)			<b>s</b>	0
	Other Expenses (identify)filing fee			\$	0
	Total		···· 🛭	\$_2,	000

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."		ss	\$ <u>98,000</u>
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate as the payments listed must equal the adjusted gro	ıd	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 \$ <u>0</u>	_ [ \$ 0
	Purchase of real estate		🗆 \$ <u>0</u>	_ [\$_0
	Purchase, rental or leasing and installation of mac		[_] \$ <u> </u>	_ [ \$_0
	Construction or leasing of plant buildings and faci	lities	🔲 \$ <u>0</u>	\$0
	Acquisition of other businesses (including the valuation of other bused in exchange for the assessuer pursuant to a merger)	ts or securities of another	<b></b>	
	Repayment of indebtedness		_	
	Vorking capital		_	
	Other (specify):			
			. 🗆 💲 0	s
	Column Totals		. 🗆 💲0	X \$ 98,000
	otal Payments Listed (column totals added)		. X \$ 98	3,000
5.5		D. FEDERAL SIGNATURE		
signa	suer has duly caused this notice to be signed by the sure constitutes an undertaking by the issuer to furn formation furnished by the issuer to any non-accre	undersigned duly authorized person. If this noti tish to the U.S. So <del>curiti</del> cs and Exchange Comm	ce is filed under Ri ission, upon writt	ule 505, the following
Issue Luck	(Print or Type) erbrook Alternative Investments, LLC	Signature	Date	Tuly 13,2009
Nam	of Signer (Print or Type)	Title of Signer (Print or Type)	***************************************	
Joh	n J. Hassett	President		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)